

06-18-01

A/RE

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PTO/SB/50 (08-00)

Approved for use through 12/30/2000 OMB 0651-0033

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## REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents  
Box Reissue  
Washington, DC 20231

Attorney Docket No.

FREEM-174X

First Named Inventor

Freeman

Original Patent Number

US 6,171,102 B1

Original Patent Issue Date  
(Month/Day/Year)

01/09/2001

Express Mail Label No.

EL 794610736 US

## APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

## APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)  
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. Original U.S. Patent currently assigned?  
☒ Yes ☐ No  
(If Yes, check applicable box(es))  
☒ Written Consent of all Assignees (PTO/SB/53)  
☒ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney  
(PTO/SB/96)

## ACCOMPANYING APPLICATION PARTS

7. ☐ Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c)
8. ☒ Original U.S. Patent for surrender  
☐ Ribbonded Original Patent Grant  
☐ Statement of Loss (PTO/SB/55)
9. ☐ Foreign Priority Claim (35 U.S.C. 119) (if applicable)
10. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☐ English Translation of Reissue Oath/Declaration (if applicable)
12. ☒ Preliminary Amendment
13. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
14. Other: .....

## 15. CORRESPONDENCE ADDRESS



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NAME (Print/Type)

Kit M. Stetina

Registration No. (Attorney/Agent)

29,445

Signature

Date

6/14/01

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**REISSUE APPLICATION FEE TRANSMITTAL FORM**Docket Number (Optional)  
**FREEM-174X**

## Claims as Filed - Part 1

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 22	Total Claims (37 CFR 1.16(j))	(B) 9	**** 0 =	x \$ 9 =	0	or	x \$ =	
(C) 2	Independent claims (37 CFR 1.16(i))	(D) 2	* 0 =	x \$ 40 =	0		x \$ =	
Basic Fee (37 CFR 1.16(h))							\$ 355	
Total Filing Fee						\$ 355	OR	\$

## Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 31	MINUS	** 22	* = 9	x \$ 9 =	81.00	x \$ =	
Independent Claims (37 CFR 1.16(i))	*** 4	MINUS	***** 2	= 2	x \$ 40 =	80.00	x \$ =	
Total Additional Fee						\$ 161	OR	\$

\* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

\*\* If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

\*\*\* After any cancellation of claims.

\*\*\*\* If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

\*\*\*\*\* "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☒ Applicant claims small entity status. See 37 CFR 1.27.☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 19-4330.  
A duplicate copy of this sheet is enclosed.☒ A check in the amount of \$ 516.00 to cover the filing / additional fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

Date \_\_\_\_\_

  
 Signature of Applicant, Attorney or Agent of Record

Kit M. Stetina

Typed or printed name

Certificate of Mailing under 37 CFR 1.8 or 37 CFR 1.10

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(Date)

  
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Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

1. Reissue Patent Application Transmittal;
2. Reissue Application Fee Transmittal (in duplicate);
3. Specification and Claims in double column copy of patent format (4 pages);
4. Drawings (2 pages);
5. Reissue Application Declaration by the Inventor (2 pages);
6. Reissue Application by the Assignee;
7. Certificate Under 37 C.F.R. § 3.73(b);
8. Copy of Notice of Recordation and Recordation Form Cover Sheet;
9. Copy of U.S. Patent No. 6,171,102 B1;
10. Preliminary Amendment (4 pages);
11. Check for \$516.00; and
12. Return Receipt Postcard